

Public Health Agreement

for

Buddy Scheme for Contraceptive Implants and IUCD Public Health Agreements

1STApril 2023 to 31st March 2024

1.0 Introduction:

All practices are requested to provide essential and additional services to their registered patients. However, some practices are unable to offer services due to training requirements, capacity or premises issues. Therefore, Surrey County Council would like to offer a service whereby surgeries will carry out Contraceptive Implants and IUCD procedures for patients registered at other practices within the county of Surrey

This Agreement will be reviewed yearly or within the year in line with any changes to Surrey County Council's Public Health Agreements.

As part of delivery of this service.

- anonymised activity data may be shared with local Place/CCG to support understanding of and improvement in provision.
- practices will receive information on related local public health services relevant to their patients

2.0 Aims of the Buddy Scheme:

Practices will work within their PCN, Place/Clinical Commissioning Group (CCG) or across Surrey to enable the Buddy Scheme to offer a choice of provider to patients but will also help to maintain services in a Primary Care setting without increasing activity in Secondary Care services.

3.0 Service Requirements:

Service gaps and demands will be identified by Surrey County Council and all practices included in the Buddy Scheme will enter a contractual agreement with Surrey County Council. All practices providing Public Health Agreements covered under the Buddy Scheme will be adhering to the requirements of the original Public Health Agreement. The provider of the Buddy Scheme will be subject to Surrey County Council Terms and Conditions.



4.0 Services included in the Buddy Scheme:

Contraceptive Implants and IUCD procedures are included in the Buddy Scheme. Surrey County Council would like to ensure that across Surrey patients have access to these services.

5.0 Practice/Patient allocations:

Practices can work over any footprint when offering a Buddy Scheme to patients. For example, a practice may buddy with a neighbouring practice, or another practice within their PCN or Place. Or they may use their local Referral Support Service (RSS) to accept referrals from across Surrey. Please note, buddying and referral pathways must be arranged between practices and is not the responsibility of Public Health to set up.

Here is an example of how a buddy scheme could work:

There are currently 5 practices within a PCN.



Practice 3 chooses **NOT** to offer an IUCD service due to lack of capacity and as they do not have a clinician suitably trained to carry out the service.



Practices 1, 2, 4 & 5 have agreed with Surrey County Council and signed an Agreement to provide this service to the patients who are registered at practice 3.



A patient attends practice 3 and requires an IUCD service. The patient will be offered a choice of practice 1, 2, 4, & 5 to attend and receive their treatment.



Once the patient has chosen which practice, they would like to attend, the GP will make the necessary referral to the chosen practice.

6.0 Administration/Information Governance:

£10.28 administration fee per patient referred via the Buddy Scheme for the practice who is providing the actual service. This fee includes booking appointments, chasing histology results, and writing back to the referring GP with details /outcome from the consultations.

The referring practice holds responsibility for entering the data received from the providing GP into the patient's medical records.

7.0 Did Not Attend (DNA) appointments:

If a patient booked in for an appointment via the Buddy Scheme, DNA's their appointment the buddy practice will inform the referring practice. The referring



practice undertakes responsibility to contact the patient and investigate the reason for the DNA.

8.0 Fees:

The practices providing a buddy service to another practice will be able to claim an administration fee of £10.28 per patient to cover the additional demand on booking clerks and the time to type up letters going back to the referring GP.

On top of the administration fee that practice will be able to claim a fee for the actual procedure being completed.

All claims are made via the quarterly claim form provided by the public health team or where agreed by public health, additional local mechanisms that have been developed to submit claims via a CCG/Place or local GP federation can be used.

9.0 Prescribing of Contraceptive Implants:

An FP10 prescription needs to be arranged in the name of the booked patient for dispensing by a pharmacy. The patient should be asked to bring the implant to the appointment. There is no prescription charge for contraceptive implants

10.0 Activity/Audit to be provided to Surrey County Council:

Claims must be submitted on the Claim Form with supporting evidence which should be broken down to show the following:

- Actual procedure carried out
- Was the procedure for contraceptive or non-contraceptive purposes
- Referring practice
- Total number of patients seen within the Buddy Scheme for that particular guarter
- Costs for administration
- If the consultation has resulted in a secondary care referral
- DNA

11.0 Training:

Those clinicians who have previously provided services similar to this Public Health Agreement and who satisfy at appraisal and revalidation that they have such continuing medical experience, training and competence as is necessary to enable them to contract for the Public Health Agreement shall be deemed professionally qualified to do so.

All members of staff providing services under the Buddy Scheme will be expected to maintain their knowledge and skills by keeping up to date with relevant literature, attending and participating in relevant courses.

And

Clinicians who sign up to provide the Public Health Agreement should be competent in resuscitation and, as for other areas of clinical practice, have a responsibility for



ensuring that their skills are regularly updated. These skills should be reviewed at the clinician's annual appraisal or clinician revalidation

12.0 Clinical Responsibility:

The clinician performing the procedure is clinically responsible for all procedures covered under the Buddy Scheme that are undertaken. However, the referring clinician will take responsibility if s/he withholds any pertinent information, e.g. patient had allergy / intervention that would impact on a known medical condition.